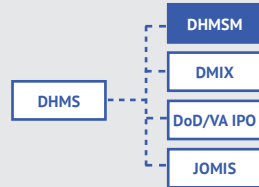


Defense Healthcare Management Systems Modernization Program Office



The mission of the Defense Healthcare Management Systems Modernization (DHMSM) program is to competitively acquire, test, deliver, and successfully transition to a state-of-the-market electronic health record (EHR) system.

PROGRAM HISTORY

2013

- » DHMSM program established (June)
- » Industry Days (October 31 and December 4)

2014

- » Release of DHMSM Draft Request for Proposals (RFPs) (January, March, June)
- » RFP released (August)
- » Industry Days (February 19 and June 25)
- » Proposals received (October)

Upcoming

- » Configure Government Approved Labs (GALs) (Q1-Q3 FY15)
- » Contract award anticipated FY15
- » Conduct system testing and begin deployment
- » IOC Site Infrastructure Assessments

LEADERSHIP

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As of March 12, 2015

RECENT ACCOMPLISHMENTS

- Released Request for Proposal (RFP) and conducted four industry days to support iterative RFP process
- Received RFP responses and initiated source selection process
- Contract awarded for Fixed Facility Government Approved Labs (GALs) in Auburn, WA
- Completed San Antonio enhanced Multi-Service Market (e-MSM) site visit

ACQUISITION STRATEGY

The DHMSM program will acquire an integrated inpatient and outpatient Best-of-Suite (BoS) EHR System to replace current DoD legacy health care systems, including but not limited to: AHLTA, Composite Health Care System (CHCS), inpatient, and most components of the Theater Medical Information Program – Joint (TMIP-J)

- Tailored acquisition program that reports directly to the USD AT&L
- Robust contract strategy featuring single-award Indefinite Delivery Indefinite Quantity (IDIQ) contract with up to ten-year ordering period
- Leverage commercial industry through open competition to ensure best value
- Modular open architecture requirements to facilitate rapid technology insertion and avoid vendor lock
- Requirements for all care environments developed by functional community, with validation through the Military Health System (MHS) governance process throughout development
- Committed to supporting evolution of interoperability through health information exchange functionality

DEPLOYMENT STRATEGY

In partnership with the Defense Health Agency (DHA), Services, and industry, DHMSM is developing a deployment and sustainment strategy to optimize the delivery of a modernized EHR with minimal disruption to the military health care community

- Deployment across DoD enterprise will include:
 - Engineering, integration, cybersecurity, program management, change management, training, communication, testing, deployment, and sustainment services
 - Enterprise software license and associated maintenance
 - Collaborate with Functional Champion to support Enterprise-wide business process mapping
 - Working with the Functional Champion to standardize business processes and reinforce clinical requirements
- For deployment planning, five regions that encompass all Military Treatment Facilities (MTFs) worldwide have been identified. Each region is subdivided into small groupings of MTFs referred to as “waves” to enable deployment to operational environments
- The IOC Site is the Puget Sound Region

Three-Pillar Approach to Successful Deployment:



Change Management



Training



Communications

FY15 OBJECTIVES

- Complete DHMSM Source Selection for Electronic Health Record modernization and award contract in FY15
- Stand up of the Government Approved Laboratory (GAL) for EHR Modernization Test and Evaluation activities
- Support Business Process Mapping efforts with the DHA and Services' Functional Champion
- Update DHMSM Acquisition Milestone documentation per DoD's Milestone Decision Authority requirements
- Continue Deployment and Sustainment planning and continue refinement of the DHMSM Deployment, Training and Change Management Plan (DTCMP)
- Deliver DHMSM Economic Analysis

ELECTRONIC HEALTH RECORD MODERNIZATION GUIDING PRINCIPLES



Standardization of clinical and business processes across the Services and the MHS



Design a patient-centric system focusing on quality, safety, and patient outcomes that meet readiness objectives



Flexible and open, single enterprise solution that addresses both garrison and operational healthcare



Clinical business process re-engineering, adoption, and implementation over technology



Configure not customize



Decisions shall be based on doing what is best for the MHS as a whole—not a single individual area



Decision-making and design will be driven by frontline care delivery professionals



Drive toward rapid decision making to keep the program on time and on budget



Provide timely and complete communication, training, and tools to ensure a successful deployment



Build collaborative partnerships outside the MHS to advance national interoperability



Enable full patient engagement in their health

MHS By the Numbers

- » 9.6 million beneficiaries
 - » 94% stationed or residing in the United States (U.S.)
 - » 6% stationed or residing outside of the U.S.
- » 146,000+ personnel
- » 1,230+ worldwide locations across 16 countries:
 - » 56 inpatient hospitals and medical centers
 - » 364 ambulatory care clinics
 - » 282 dental clinics
 - » 300+ expeditionary units